

Emergency Medical Services

uconnems.uchc.edu

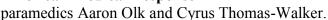


EMS Pain Management Heroes

December 2014, Issue 55

In October there were 9 hip fracture patients brought in by EMS. 8 had documented pain scales. Of the 4 patients who had pain of 8 or greater, 3 received analgesia. Great job by

UCONN Fire Department
Paramedics Tom Paranzino and
American Medical Response



Remember: Run form documentation will include an assessment of the patient's pain, the nature of the pain, treatment of the pain, a reassessment of the pain, and patient satisfaction with pain relief efforts. If a paramedic chooses not to medicate a patient in moderate to severe pain, the reasons for withholding analgesia must be documented.

Thumbs Up:

Canton Ambulance AEMT Linda Scarchuk and her EMT partner Tabitha Blanchard called for an ALS intercept for pain management when their patient, a 91 female with a suspected broken hip, said she was in 10 of 10 pain that hurt worse than having a baby. UCONN paramedic Tom Paranzino arrived and gave the





woman 150 mcgs of Fentanyl. Great job by the Canton crew advocating for their patient!

Farmington Cardiac Arrest Save!

A 69 year old male began having a hard time breathing at home, and then collapsed. His wife called 911 and Farmington Police Department officers Sean Fritz and Aaron Benham arrived on scene within 5 minutes and started CPR. They applied their AED, which prompted them to deliver a shock. They shocked the patient twice. **American Medical Response EMTs** Krystle Palmarozza and Ryan Baca and assisted with the CPR. UCONN Fire **Department** paramedics Tony Ruggerio, Mathew Kellick and a paramedic student from the New Britain EMS Academy arrived and delivered a third shock. **Farmington Fire Department** responders Chief Tom Slater, Assistant Chief Don Antigiovanni, Fire Fighter Zac Coulombe and Fire Fighter Jamie Druzinsky also

Antigiovanni, Fire Fighter Zac Coulombe and Fire Fighter Jamie Druzinsky also arrived and assisted in the team effort. The patient soon had pulses back and blood pressure. The medics secured the patients airway and he was transported to **John Dempsey Hospital.** After a five day stay in the hospital which included the

implantation of an internal defibrillator, the patient was discharged home with full neurological

function. Another great team effort by our local EMS system. Kudos to all you lifesavers! Well done!





UCONN FIRE RESCL

Stroke Alerts

We had 7 EMS **Stroke Alerts** last month between October 20 and November 20. (4 Strokes came in without alerts). 3 of the EMS stroke patients received TPA. A Stroke Alert enables us to activate the stroke team, bring the patient directly



to CAT Scan on the EMS stretcher, give the patient a full stroke assessment by a neurologist, and prepare TPA to give if indicated. 100% of EMS stroke alerts this month went directly to CAT Scan. The Stroke **Alert** can save 15-20 minutes of brain tissue when all goes well. Great job this month by EMS crews from **UCONN Fire Department, American Medical** Response, and Simsbury Ambulance. Remember early notification saves lives. Any patient suspected of having an acute stroke should get a stroke alert. If you are uncertain call in a possible stroke alert. Always err on the side of the patient.

Latest Stroke Research

"Irrespective of age or stroke severity, and despite an increased risk of fatal intracranial

THE LANCET Effect of treatment delay, age, and stroke severity on the effects of intravenous thrombolysis with alteplase for acute ischaemic stroke: a meta-analysis of individual patient data

hemorrhage during the first few days after treatment, alteplase significantly improves the overall odds of a good stroke outcome when delivered within 4.5 h of stroke onset, with earlier treatment associated with bigger proportional benefits."

Effect of treatment delay, age, and stroke severity on the effects of intravenous thrombolysis with alteplase for acute ischaemic stroke: a meta-analysis of individual patient data from randomised trials. The Lancet, online August 6, 2014

"The Biology of stroke is clear and immutable: patients must be treated with extraordinary speed.... Delayed treatment is the same as no treatment."

Alteplase in acute ischaemic stroke: the need for speed The Lancet, Online August 6, 2014

UConn Health Center EMS Website

For news, educational information, CME schedule and past copies of our newsletter Partners, check out our website at:

uconnems.uchc.edu



UCONN EMS CONTINUING EDUCATION

December Morning EMS CME



Tachvcardia:

When to Give Fluid, When to Give Medicine, When to Shock, When to Do Nothing TBA

Case Reviews:

Richard Kamin, M.D. Peter Canning, Paramedic, R.N.

Research Review: Stroke

CAT SCAN in Your Ambulance?

Effects of Golden Hour Thrombolysis: A Prehospital Acute Neurological Treatment and Optimization of Medical Care in Stroke (PHANTOM-S) Substudy. JAMA Neurology November 2014

Prehospital Benchmarks: Stroke

The Quality of Prehospital Ischemic Stroke Care: Compliance with Guidelines and Impact on In-hospital Stroke Response Journal of Stroke and Cerebrovascular Diseases October 2014

> December 17, 2014 (Wednesday) 8:30 A.M. East Farms Fire Department 94 South Road, Farmington, CT

Bagels and Coffee will be served For Questions, email Peter Canning at canning@uchc.edu

ALL EMS RESPONDERS AND GENERAL PUBLIC WELCOME

UCONN EMS CONTINUING EDUCATION **2014 Wednesday Morning CMEs**



December 17, 2014 8:30-11:30 A.M. East Farms Fire, 94 South Road, Farmington



CONTACT US:

